Fill in this information to identify your c	ase:
United States Bankruptcy Court for the: DISTRICT OF HAWAII	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is government-issued p	icture First Name	Carly First Name
identification (for exa your driver's license of	T L !	Nicole
passport).	Middle Name	Middle Name
	Nihei	Nihei
Bring your picture identification to your i	Last Name meeting	Last Name
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the las		First Name
years		
Include your married		Middle Name
maiden names and a assumed, trade name "doing business as" r	es and	Last Name
Do NOT list the name separate legal entity:	•	First Name
a corporation, partner		Middle Name
petition.	Last Name	Last Name
	Business name (if applicable)	Business name (if applicable)
	Business name (if applicable)	Business name (if applicable)

	otor 1 Keith Tsuyoshi Nihe otor 2 Carly Nicole Nihei	i	Cas	se number (if known)		
		About Debtor 1:		About Debtor 2 (Sp	ouse Only in a Joint Case):	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	xxx - xx - 9 4 9 OR 9xx - xx		xxx - xx - 3 OR 9xx - xx -	437	
	(ITIN)	VAA — AA —		J X X X X X X X X X X		
4.	Your Employer Identification Number (EIN), if any.	EIN	— — — —			
5.	Where you live	EIN		EIN If Debtor 2 lives at a	a different address:	
		460 Kamaaha Ave #22				
		Number Street		Number Street		
			707			
		City State ZIP Honolulu	Code	City	State ZIP Code	
		County		County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		Number Street		460 Kamaaha Ave	e. #22	
		Trainbal Stroot		rambor Cacot		
		P.O. Box		P.O. Box		
		City State ZIP	Code	Kapolei City	HI 96707 State ZIP Code	
6.	Why you are choosing	Check one:		Check one:		
	this district to file for bankruptcy	Over the last 180 days before filin petition, I have lived in this district than in any other district.	•		80 days before filing this lived in this district longer er district.	
		I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another (See 28 U.S.C.	reason. Explain. § 1408.)	
Р	art 2: Tell the Court Ab	out Your Bankruptcy Case				
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of ea for Bankruptcy (Form 2010)). Also, go to			,	
	are choosing to file under	Chapter 7				
		Chapter 11				
		Chapter 12				
		Chapter 13				

Debtor 1

	otor 1 Keith Tsuyoshi Ni otor 2 Carly Nicole Nihei				Case num	nber (if known)	
8.	How you will pay the fee		court pay w	pay the entire fee when I file my p for more details about how you may with cash, cashier's check, or money If, your attorney may pay with a cred	/ pay. Typicall order. If your	y, if you are pay attorney is sub	ring the fee yourself, you may mitting your payment on your
				d to pay the fee in installments. If duals to Pay The Filing Fee in Insta	•		and attach the Application for
			By lar	uest that my fee be waived (You n w, a judge may, but is not required t 150% of the official poverty line that n installments). If you choose this of Fee Waived (Official Form 103B) a	o, waive your f applies to you ption, you mus	ee, and may do ir family size an t fill out the App	so only if your income is less d you are unable to pay the
9.	Have you filed for		No				
	bankruptcy within the last 8 years?		Yes.				
		Dist	rict _		When		Case number
		5					
		Dist	rict _		When	MM / DD / YYYY	Case number
		Dist	rict _		When		Case number
40	Ave envi henkvintev	_	Na			MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being		No				
	filed by a spouse who is		Yes.				
	not filing this case with you, or by a business	Deb	tor _			Relationsh	nip to you
	partner, or by an	Dist	rict _		When		Case number,
	affiliate?					MM / DD / YYYY	if known
		Deb	tor _			Relationsh	nip to you
		Dist	rict		When		Case number,
						MM / DD / YYYY	
11.	Do you rent your residence?		No. Yes.	Go to line 12. Has your landlord obtained an evid	ction judgment	: against you?	
				No. Go to line 12. Yes. Fill out Initial Statement and file it as part of this bank		•	Against You (Form 101A)

	tor 1 tor 2	Keith Tsuyoshi Nihe Carly Nicole Nihei	ei				Case numbe	er (if known) _		
Pa	art 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole P	roprietor			
12.		u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of b	usiness				
	busines individu separat	oroprietorship is a se you operate as an al, and is not a e legal entity such as ration, partnership, or			Name of business, if any Number Street					
	sole pro	ave more than one oprietorship, use a e sheet and attach it setition.			Single Asset Rea Stockbroker (as of	ness (as d I Estate (a lefined in ^a er (as defir	scribe your busine efined in 11 U.S.C is defined in 11 U.S 11 U.S.C. § 101(53 ned in 11 U.S.C. §	. § 101(27A)) S.C. § 101(51E BA))	ZIP Cod	de
13.	Chapte Bankru are you debtor defined § 1182(For a de busines	u filing under r 11 of the ptcy Code, and a a small business or a debtor as I by 11 U.S.C. 1)? efinition of small as debtor, see C. § 101(51D).	cho are mos	osing t a smal st recer any of No.	filing under Chapter 11, or proceed under Subchall business debtor or you at balance sheet, statem is these documents do not I am not filing under Chapthe Bankruptcy Code. I am filing under Chap Bankruptcy Code, and I am filing under Chap Bankruptcy Code, and Bankruptcy Code, and	apter V so u are choodenent of ope ot exist, fol hapter 11. ter 11, but ter 11, I ar I do not co ter 11, I ar	that it can set app sing to proceed un erations, cash-flow flow the procedure I am NOT a small in a small business thoose to proceed un a debtor accordii	ropriate deadlider Subchapte statement, and in 11 U.S.C. § business debte debtor accordunder Subchapte to the definite of the	ines. If you must be federal into the federal into the federal into the doter V of Chition in § 11	indicate that you ust attach your come tax return g to the definition in the apter 11. 82(1) of the
Pa	art 4:	Report If You Ov	vn oı	Hav	e Any Hazardous I					
14.	propert alleged immine hazard safety? any pro	ty that poses or is to pose a threat of ent and identifiable to public health or or or do you own operty that needs inte attention?		No Yes.	What is the hazard? If immediate attention	is needed	, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number	Street			
						City			State	ZIP Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:					
☐ Incapacity.	I have a mental illness or a mental				

deficiency that makes me incapable of realizing or making rational decisions about finances.

through the internet, even after I

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

Active duty. I am currently on active military duty in a military combat zone.

reasonably tried to do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Keith Tsuvoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. $\overline{\mathbf{Q}}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. \square No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and ☐ No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 18. How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 10,001-25,000 More than 100,000 100-199 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion П \square estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth?

П

 $\sqrt{}$

П

\$50,000,001-\$100 million

\$1,000,001-\$10 million

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

\$100,000,001-\$500 million

П

П

П

\$10,000,000,001-\$50 billion

More than \$50 billion

More than \$50 billion

\$500,000,001-\$1 billion

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

\$100,001-\$500,000

\$500,001-\$1 million

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

\$0-\$50,000

20. How much do you

be?

estimate your liabilities to

Debtor 2	Carly Nicole Nihei	Case number (if known)
Deptor 1	Keith Tsuyoshi Ninei	

Part 7:

Sign Below

.

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Keith Tsuyoshi Nihei

Keith Tsuyoshi Nihei, Debtor 1

Executed on <u>09/28/2023</u> MM / DD / YYYY X /s/ Carly Nicole Nihei

Carly Nicole Nihei, Debtor 2

Executed on <u>09/28/2023</u> MM / DD / YYYY

Debtor 1 Debtor 2	Keith Tsuyoshi Ni Carly Nicole Nihei			Case number (if	knowi	n)	
For your at represente	torney, if you are d by one	eligibility to proce	eed under Chapter 7, 11, 12,	or 13 of title 11, Unite	d Sta	informed the debtor(s) about tes Code, and have explained the o certify that I have delivered to	
If you are not represented by an attorney, you do not need to file this page.			the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.				
		X /s/ Blake Go Signature of A	oodman Attorney for Debtor		Date	09/28/2023 MM / DD / YYYY	
		Blake Good					
		Blake Good Firm Name					
			reet Mall, #910				
		-	Gueet				
		Honolulu City		HI State		96813 ZIP Code	
		City		State		ZIF Code	
		Contact phone	e (808) 528-4274	Email address _			

Bar number

State

Debtor 1	Keith First Name	Tsuyoshi Middle Name	Nihei Last Name		
ebtor 2	Carly	Nicole	Nihei		
	ng) First Name	Middle Name	Last Name		
d States	Bankruptcy Court fo	or the: DISTRICT OF	HAWAII		
number					[
nown)					
cial Fo	rm 106Sum				
nary	of Your Ass	ets and Liabilit	ties and Certain	Statistical In	forma
1:	Summarize You	ai Assets			
Schedule	A/B: Property (Offici	ial Form 106A/B)			
1a Conv	line 55, Total real e	state, from Schedule A	/B		
та. Сору					
	line 62, Total perso	nal property, from Sche	edule A/B		
1b. Copy			edule A/B		
1b. Copy		property on Schedule <i>I</i>			
1b. Copy	line 63, Total of all	property on Schedule <i>I</i>			
1b. Copy 1c. Copy art 2: Schedule	line 63, Total of all Summarize You D: Creditors Who Ha	property on Schedule Aur Liabilities			
1b. Copy 1c. Copy Part 2: Schedule 2a. Copy Schedule	Summarize You D: Creditors Who Hathe total you listed in	property on Schedule Aur Liabilities ave Claims Secured by in Column A, Amount of the Chair and the	VB	I06D) he last page of Part	1 of Sche
1b. Copy 1c. Copy art 2: Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Hathe total you listed it	property on Schedule Aur Liabilities ave Claims Secured by in Column A, Amount of the Unsecured Claims on Part 1 (priority unsecured claims)	Property (Official Form f claim, at the bottom of its (Official Form 106E/F)	I06D) he last page of Part of Schedule E/F	1 of Sche
1b. Copy 1c. Copy rt 2: Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Hathe total you listed it	property on Schedule Aur Liabilities ave Claims Secured by in Column A, Amount of the Unsecured Claims on Part 1 (priority unsecured claims)	Property (Official Form f claim, at the bottom of second (Official Form 106E/F) bured claims) from line 6e	I06D) he last page of Part of Schedule E/F	1 of Sch

Part 3: Summarize Your Income and Expenses

	btor 1 btor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)
P	Part 4:	Answer These Questions for Administrative and Statist	ical Records
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?	
	☐ No ✓ Ye	 You have nothing to report on this part of the form. Check this box and ses 	submit this form to the court with your other schedules.
7.	What k	ind of debt do you have?	
	<u> </u>	our debts are primarily consumer debts. Consumer debts are those "inc mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stat	
		bur debts are not primarily consumer debts. You have nothing to report is form to the court with your other schedules.	on this part of the form. Check this box and submit
8.		he Statement of Your Current Monthly Income: Copy your total current in Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	¢47.660.06
9.	Copy tl	he following special categories of claims from Part 4, line 6 of Schedu	le E/F:
			Total claim
	From P	Part 4 on Schedule E/F, copy the following:	
	9a. Do	omestic support obligations. (Copy line 6a.)	\$0.00_
	9b. Ta	exes and certain other debts you owe the government. (Copy line 6b.)	\$11,148.21

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

\$27,843.21

\$16,695.00

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII HONOLULU DIVISION

One lead to Attack	
Carly Nicole Nihei	

	Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was:
	☑ Debtor ☐ Other (specify)
3.	The source of compensation to be paid to me is:
	☑ Debtor ☐ Other (specify)
4.	✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form	2030)	(12/15)
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	CERTIFICATION	
I certify that the foregoing is a compleoresentation of the debtor(s) in this be	ete statement of any agreement or arrangement for pay	ment to me for
09/28/2023	/s/ Blake Goodman	
Date	Blake Goodman Blake Goodman, PC 900 Fort Street Mall, #910 Honolulu, HI 96813	Bar No.
	Phone: (808) 528-4274 / Fax: (808) 635-10	08
Keith Tsuyoshi Nihei	/s/ Carly Nicole Nihei	

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Fill in this in	nformation to i	dentify your case	and this filing:		
Debtor 1	Keith	Tsuyoshi	Nihei		
	First Name	Middle Name	Last Name		
Debtor 2	Carly	Nicole	Nihei		
(Spouse, if filing	g) First Name	Middle Name	Last Name		
United States B	ankruptcy Court fo	the: DISTRICT OF	HAWAII		
Case number (if known)				☐ Checl	k if this is an
Official Form	- 106A/D			amen amen	ded filing
Official Forn					
Schedule A	VB: Property	/			12/15
Part 1: Do	escribe Each R	tesidence, Buildi	write your name and case nur ng, Land, or Other Real E t in any residence, building, la	Estate You Own or Hav	
ш	o to Part 2. Vhere is the propert	у?			
1.1.			he property?		aims or exemptions. Put the
460 Kamaaha	Ave. #22 ailable, or other descrip		that apply.	amount of any secured cla Creditors Who Have Clain	
	allable, of other descrip	Duple	e-family home ex or multi-unit building	Current value of the	Current value of the
		=	lominium or cooperative	entire property?	portion you own?
Kapolei City			ıfactured or mobile home	\$813,936.00	\$813,936.00
Oity	State Zii	□	stment property	Describe the nature of y	our ownership
			share	interest (such as fee sim	
Honolulu County		☐ Othe	r	entireties, or a life estate	e), if known.
County		Who has	an interest in the property?	Tenants by the Entire	ty
460 Kamaaha A		Check or			
#22 Kapolei, H		□ Dobt	or 1 only	☐ Check if this is com	munity property
_	Zillow less 7% o	ost of \Box	or 2 only	(see instructions)	munity property
sale			or 1 and Debtor 2 only	, ,	
		<u></u>	ast one of the debtors and anoth	er	
		Other inf	formation you wish to add about identification number:		

	suyoshi Nihei licole Nihei	Cas	se number (if known)		
1.2. Disney Aulani Kapolai, HI Disney Aulani Timeshare Honolulu County 2. Add the dollar value of the portion you of		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about property identification number:	this item, such as local		
entries for page		own for all of your entries from Part 1, incli	_	\$819,336.00	
you own that someone 3. Cars, vans, truc	e else drives. If you leas	e interest in any vehicles, whether they are e a vehicle, also report it on Schedule G: Exectly vehicles, motorcycles	_	•	
Yes 3.1. Make: Model: Year: Approximate mileage: Other information: 2020 Ford F150 FX miles)	(approx. 25,323	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$31,400.00	ms on <i>Schedule D:</i>	
[FMV based on JD 3.2. Make: Model:	Power's report] Honda Civic HB SI	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on Schedule D: s Secured by Property.	
Year: Approximate mileage: Other information: 1992 Honda Civic	<u> </u>	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property	Current value of the entire property? \$2,425.00	Current value of the portion you own? \$2,425.00	
122,239 miles) [FMV based on JD	Power's report]	(see instructions)			

Debtor 2 **Carly Nicole Nihei** Case number (if known) 3.3. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Check one. Volks Wagon Make: Creditors Who Have Claims Secured by Property. □ Debtor 1 only Model: Bettle N/A Debtor 2 only Current value of the Current value of the П 1966 Year: entire property? portion you own? Debtor 1 and Debtor 2 only \square Approximate mileage: 125,785 At least one of the debtors and another \$1,585.00 \$1,585.00 Other information: 1966 Volks Wagon Bettle Check if this is community property (see instructions) [FMV based on JD Power's report] 3.4. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Make: Acura Check one. Creditors Who Have Claims Secured by Property. □ Debtor 1 only Integra LX Model: Debtor 2 only Current value of the Current value of the П Year: 1997 entire property? portion you own? Debtor 1 and Debtor 2 only \square Approximate mileage: 172,879 At least one of the debtors and another \$1,925.00 \$1,925.00 Other information: 1997 Acura Integra LX (approx. Check if this is community property (see instructions) 172,879 miles) [FMV based on JD Power's report] 3.5. Do not deduct secured claims or exemptions. Put the Who has an interest in the property? amount of any secured claims on Schedule D: Check one. Make: Honda Creditors Who Have Claims Secured by Property. Debtor 1 only **CRF125F Dirt bike** Model: ☐ Debtor 2 only Current value of the Current value of the Year 2021 entire property? portion you own? Debtor 1 and Debtor 2 only Approximate mileage: At least one of the debtors and another \$4,000.00 \$4,000.00 Other information: 2021 Honda CRF125F Dirt bike Check if this is community property (see instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No **√** Yes 4 1 Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Check one. amount of any secured claims on Schedule D: Make: Yamaha Creditors Who Have Claims Secured by Property. Debtor 1 only YZ250FX Model: Current value of the Debtor 2 only Current value of the П Year: 2021 entire property? portion you own? Debtor 1 and Debtor 2 only \square Other information: At least one of the debtors and another \$5.000.00 \$5.000.00 2021 Yamaha YZ250FX **Dirt Bike** Check if this is community property (see instructions) In possession of debtors' son. He is making the monthly payments 4.2. Who has an interest in the property? Do not deduct secured claims or exemptions. Put the Make: Honda Check one. amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. □ Debtor 1 only CRF125F Model: Debtor 2 only Current value of the Current value of the Year: 2022 entire property? portion you own? Debtor 1 and Debtor 2 only \square Other information: At least one of the debtors and another \$3,000.00 \$3,000.00 2022 Honda CRF125F **Dirt Bike** Check if this is community property (see instructions)

Debtor 1

Keith Tsuvoshi Nihei

Debt Debt		Carly Nicole		Cas	se number (if known)	
	el: : er inform	Hor CRI 200 ation:	F50	Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	amount of any secured cla Creditors Who Have Claim Current value of the entire property?	
	Bike	ia ordi oo		Check if this is community property (see instructions)		
	el: : er inform 3 Burro	TT1 202	<u>-</u>	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	amount of any secured cla Creditors Who Have Claim Current value of the entire property?	
				own for all of your entries from Part 2, incl r Part 2. Write that number here		\$51,335.00
6.	Housel	hold goods and	d furnishings	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			on page(s).		\$1,451.00
	Electro Example	les: Televisions		, video, stereo, and digital equipment; comput devices including cell phones, cameras, media	-	
	_	s. Describe	See continuation	on page(s).		\$1,375.00
	□ No	stamp, coir	•	ngs, prints, or other artwork; books, pictures, o collections; other collections, memorabilia, co	•	\$700.00
			and hobbies otographic, exercise	e, and other hobby equipment; bicycles, pool to	tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe]
	Firearn Exampl	les: Pistols, rifle	es, shotguns, amm	unition, and related equipment		
	ڪ	s. Describe]

	tor 1	Keith Tsuyo			
Deb	tor 2	Carly Nicole	Nihei	Case number (if known)	
11.		<i>les:</i> Everyday c	lothes, furs, le	ather coats, designer wear, shoes, accessories	
	□ No ✓ Ye		Clothing / V	Vearing Apparel for 2 adult(s)	\$50.00
12.	Jewelr Examp	•	ewelry, costum	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	☐ No ☑ Ye	Г	Watch/jewe	lry	\$250.00
13.		rm animals /es: Dogs, cats,	birds, horses		
	☐ No ✓ Ye	s. Describe	Dog		\$0.00
14.	Any ot	•	nd household	items you did not already list, including any health aids you	-
	✓ No				
		s. Give specific ormation]
15.	Add th	e dollar value o	of all of vour e	entries from Part 3, including any entries for pages you have	J
			-	per here	\$3,826.00
P	art 4:	Describe \	Your Finan	cial Assets	
				ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	les: Money you petition	have in your v	vallet, in your home, in a safe deposit box, and on hand when you file your	
	□ No	s		Cash:	\$500.00
17.	— Depos	its of money les: Checking, s	savings, or oth	ner financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same	
	□ No ☑ Ye	s		Institution name:	
	17	7.1. Checking	account:	Hawaii State FCU (Checking #9473)	\$42.70
	17	7.2. Checking		American Savings Bank (Checking #2080)	\$5,469.17
	17	7.3. Checking	account:	American Savings Bank (Checking #2354)	\$1,831.51
	17	7.4. Savings a	account:	Hawaii State FCU (Savings/Money Market #8600)	\$0.00
	17	7.5. Savings a	account:	Hawaii State FCU (Savings/Money Market #9460)	\$0.00

	tor 1 tor 2	Keith Tsuyoshi Carly Nicole Nil		Case number (if known)	
18.	Exampl		publicly traded stocks vestment accounts with	s h brokerage firms, money market accounts	
	□ No ✓ Yes	S	Institution or issuer r	name:	
			40 shares of Goo	gle	\$5,410.00
			3 shares of Amer	ican Lithium	\$4.65
			2 shares of Ares	Capital Corp.	\$38.82
				C Commercial Metals Company	\$599.06
				of Plateau Mineral Dev.	\$2.25
19.	-	-	k and interests in inco	orporated and unincorporated businesses, including enture	
		s. Give specific ormation about			
	the	m	Name of entity:	% of ownership:	
20.	Negotia	able instruments inc	lude personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
	info	s. Give specific ormation about m	Issuer name:		
21.		nent or pension ac les: Interests in IRA profit-sharing p	A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	□ No				
		s. List each count separately.	Type of account:	Institution name:	
	aoc	. ,	,,	Empower Retirement	\$27,956.18
				Hawaii Ironworkers Pension Trust Fund	\$2,070.00
			Pension plan:		
	0		Retirement account:	Hawaii Ironworkers Trust Fund	\$114,322.29
22.	Your sh Example		eposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications	
	☑ No				
	_	S		stitution name or individual:	
23.	Annuiti No	ies (A contract for	a specific periodic pay	ment of money to you, either for life or for a number of years)	
		S	Issuer name and des	scription:	
24.			IRA, in an account in 9A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition pro	ogram.
				description. Separately file the records of any interests. 11 U.S.C.	§ 521(c)
25.	powers	equitable or futur s exercisable for y		y (other than anything listed in line 1), and rights or	
		s. Give specific promation about them	n		

	tor 1 Keith Tsuyo tor 2 Carly Nicole			Case number	(if known)	
26.	Examples: Internet dor		, trade secrets, and other intellectual s, websites, proceeds from royalties and				
	✓ No✓ Yes. Give specific information about t	nem					
27.	Licenses, franchises, Examples: Building pe		general intangibles sive licenses, cooperative association h	noldings, liquor licenses,	, professio	onal licens	ses
	✓ No☐ Yes. Give specific information about to	nem					
Mor	ney or property owed to	you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to	ou					
	✓ No Yes. Give specific about them, including your already filed the and the tax years	ng whether e returns				Federal: State: Local:	
29.	Family support Examples: Past due or	lump sum	alimony, spousal support, child support	maintenance, divorce s	settlemen	t, property	settlement
	✓ No Yes. Give specific	information	1	A	Alimony:		
				ı	Maintenar	nce:	
				\$	Support:		
				[Divorce se	ettlement:	
				F	Property s	ettlement	<u> </u>
30.		es, disabili on, Social	ty insurance payments, disability benefi Security benefits; unpaid loans you mad		y, worker	s'	
21	Interests in insurance	nolicios					
J1.		•	e insurance; health savings account (HS	SA); credit, homeowner's	s, or rente	r's insurar	nce
	No Yes. Name the ins company of each p and list its value	olicy	Company name:	Beneficiary:		Sui	rrender or refund value:
		-	Hawaii Ironworkers Trust Fund Гуре: whole/universal nsured: myself	Carly Nihei			\$50,000.00
32.		y of a livin	lue you from someone who has died g trust, expect proceeds from a life insulate se someone has died	rance policy, or are curre	ently		
	✓ No✓ Yes. Give specific	informatio	ו				

	tor 1 tor 2	Keith Tsuy Carly Nico		Case number (if known)	
33.	Examp	les: Accidents	•	ther or not you have filed a lawsuit or made a demand for payment disputes, insurance claims, or rights to sue	
	☐ No ☑ Yes		ach claim	Claims against Cordoba Legal for restitution for debt negotiation services	Unknown
34.	rights t	to set off clai		d claims of every nature, including counterclaims of the debtor and	
	✓ No ☐ Yes		ach claim		
35.	Any fin	ancial assets	s you did not a	already list	
	✓ No ☐ Yes		fic information		
36.				rentries from Part 4, including any entries for pages you have	\$208,246.63
Pa	art 5:	Describe A	Any Busines	ss-Related Property You Own or Have an Interest In. List any	real estate in Part 1
37.	Do you	own or have	any legal or	equitable interest in any business-related property?	
	_	. Go to Part 6 s. Go to line 3			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable	e or commissi	ions you already earned	
	✓ No ☐ Yes	s. Describe			
39.		les: Business	urnishings, an -related compu nairs, electronic	uters, software, modems, printers, copiers, fax machines, rugs, telephones,	
	□ No ✓ Yes	s. Describe	See continu	uation page(s).	\$160.00
40.	Machir	nery, fixtures	, equipment, s	supplies you use in business, and tools of your trade	1
	□ No ☑ Yes	s. Describe	Tools		\$150.00
41.	Invento	ory			1
	□ No				1
	✓ Yes	s. Describe	Tools		\$200.00

	tor 1 Keith Tsuyoshi Nihei Carly Nicole Nihei Case number (if known)	
42.	Interests in partnerships or joint ventures	
40	✓ No ☐ Yes. Describe Name of entity: % of ownership:	
43.	Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe]
44.	Any business-related property you did not already list ☑ No ☐ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$510.00
Pa	art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.	Current value of the portion you own?
47.	Farm animals Examples: Livestock, poultry, farm-raised fish No Yes	Do not deduct secured claims or exemptions.
48.	Cropseither growing or harvested	J
	✓ No Yes. Give specific information]
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes]
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No Yes. Give specific information]
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	1?		
	✓ No✓ Yes. Give specific information.			
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here	→	\$0.00
P	art 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$819,336.00
56.	Part 2: Total vehicles, line 5	\$51,335.00		
57.	Part 3: Total personal and household items, line 15	\$3,826.00		
58.	Part 4: Total financial assets, line 36	\$208,246.63		
59.	Part 5: Total business-related property, line 45	\$510.00		

60. Part 6: Total farm- and fishing-related property, line 52

			Copy personal			
62. Total personal property.	Add lines 56 through 61	\$263,917.63	property total	→	+	\$263,917.63

\$0.00

Case number (if known)

6.	Household goods and furnishings (details):	
	1 Sofa(s)	\$200.00
	Entertainment Center / Tv Cabinet	\$20.00
	DINING TABLE	\$20.00
	REFRIGERATOR / FREEZER	\$200.00
	FREEZER	\$200.00
	STOVE	\$150.00
	MICROWAVE	\$20.00
	DISH WASHER	\$75.00
	WASHING MACHINE	\$100.00
	CLOTHES DRYER	\$100.00
	DISHES / FLATWARE	\$50.00
	CHINA / SILVERWARE	\$50.00
	POTS / PANS / COOKWARE	\$100.00
	3 BED	\$50.00
	DRESSER(S) / NIGHTSTAND(S)	\$10.00
	LAMPS / ACCESSORIES	\$100.00
	LAWNMOWER	\$1.00
	YARD /LANDSCAPING TOOLS	\$5.00
7.	Electronics (details):	
	55 in. Q LED	\$300.00
	50in. flat screen	\$100.00
	32in. flat screen	\$50.00
	32in. flat screen	\$50.00
	PERSONAL COMPUTER	\$200.00
	STEREO	\$100.00
	VIDEO GAME SYSTEM	\$75.00
	CELLULAR TELEPHONE	\$500.00
8.	Collectibles of value (details):	
	wall art	\$100.00
	K Pop albums	\$350.00
	K Pop Merch	\$250.00
39.	Office equipment, furnishings, and supplies (details):	
	2 desk	\$100.00

Debtor 1 Debtor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)	
2 offi	ice chairs		\$50.00
comp	outer monitor		\$10.00

Fill in this inf	ormation to i	dentify your	case:			
Debtor 1	Keith	Tsuyoshi	i Nihei			
Debtor 2	First Name Carly	Middle Name Nicole	e Last Name Nihei			
(Spouse, if filing)		Middle Name				
United States Ba	nkruptcy Court fo	or the: DISTRIC	r of Hawaii			Check if this is an
Case number (if known)				amended filing		
Official Form	106C					
Schedule C	: The Prope	erty You Cl	aim as Exemp	ot		04/2
Using the property	you listed on <i>Sci</i> ill out and attach	<i>hedule A/B: Prop</i> e to this page as m	erty (Official Form 106	6A/B)	as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	fic dollar amoung the amount of any tenefits, and tax-e of fair market	nt as exempt. Al y applicable stat exempt retirement value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	clair cemp imite mpti	n the full fair market v tionssuch as those i d in dollar amount. H	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Pro	perty You Cla	im as Exempt			
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
النا	-		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
— 2. For any prop	erty you list on	Schedule A/B th	at you claim as exen	npt, 1	ill in the information I	below.
Brief description Schedule A/B that			Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$813,936.00		\$110,751.28	11 USC § 522(b)(3)(B), Haw. Rev.
460 Kamaaha A					100% of fair market	Stat. § 509-2
#22 Kapolei, HI FMV based on Z Line from <i>Schedul</i> e	Zillow less 7%	cost of sale			value, up to any applicable statutory limit	
Brief description:			\$5,400.00	$\overline{\mathbf{V}}$	\$600.00	11 USC § 522(b)(3)(B), Haw. Rev.
Disney Aulani T Line from Schedul					100% of fair market value, up to any applicable statutory limit	Stat. § 509-2
•	-	-	more than \$189,050? /ears after that for cas		ed on or after the date	of adjustment.)
☑ No						

Part 2: Additional Page					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption			
Brief description: 2020 Ford F150 FX (approx. 25,323 miles) [FMV based on JD Power's report] Line from Schedule A/B: 3.1	\$31,400.00	\$2,557.91 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(2)		
Brief description: 1992 Honda Civic HB SI (approx. 122,239 miles) [FMV based on JD Power's report] Line from Schedule A/B: 3.2	\$2,425.00	\$2,425.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(2)		
Brief description: 1 Sofa(s) Line from Schedule A/B: 6	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: Entertainment Center / Tv Cabinet Line from Schedule A/B: 6	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: DINING TABLE Line from Schedule A/B:6	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: REFRIGERATOR / FREEZER Line from Schedule A/B: 6	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: FREEZER Line from Schedule A/B:6	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: STOVE Line from Schedule A/B:6	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		
Brief description: MICROWAVE Line from Schedule A/B:6	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	Haw. Rev. Stat. § 651-121(1)		

Case number (if known)

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: DISH WASHER	\$75.00	\$75.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: WASHING MACHINE	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: CLOTHES DRYER	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: DISHES / FLATWARE	\$50.00	\$50.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B: 6		value, up to any applicable statutory limit	
Brief description: CHINA / SILVERWARE	\$50.00	\$50.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B: 6		value, up to any applicable statutory limit	
Brief description: POTS / PANS / COOKWARE	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: 3 BED	\$50.00	\$50.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: DRESSER(S) / NIGHTSTAND(S)	\$10.00	\$10.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	
Brief description: LAMPS / ACCESSORIES	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)
Line from Schedule A/B:6		value, up to any applicable statutory limit	

Case number	(if known)	
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Part 2: Additional Page			`		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption			
Brief description: LAWNMOWER	\$1.00	≸1.00 ☐ 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:6		value, up to any applicable statutory limit			
Brief description: YARD /LANDSCAPING TOOLS	\$5.00	\$5.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:6		value, up to any applicable statutory limit			
Brief description: 55 in. Q LED	\$300.00	\$300.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:7		value, up to any applicable statutory limit			
Brief description: 50in. flat screen	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B: 7		value, up to any applicable statutory limit			
Brief description: 32in. flat screen	\$50.00	▼ \$50.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B: 7		value, up to any applicable statutory limit			
Brief description: 32in. flat screen	\$50.00	\$50.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:7		value, up to any applicable statutory limit			
Brief description: PERSONAL COMPUTER	\$200.00	\$200.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B: 7		value, up to any applicable statutory limit			
Brief description: STEREO	\$100.00	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:7		value, up to any applicable statutory limit			
Brief description: VIDEO GAME SYSTEM	\$75.00	₹75.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:7		value, up to any applicable statutory limit			

Case number	(if known)	
Case Harriser	(11 10110)	

Part 2: Additional Page						
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B		ck only one box for h exemption			
Brief description: CELLULAR TELEPHONE	\$500.00		\$500.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B: 7			value, up to any applicable statutory limit			
Brief description: wall art	\$100.00	1	\$100.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:8			value, up to any applicable statutory limit			
Brief description: K Pop albums	\$350.00	<u> </u>	\$350.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:8		_	value, up to any applicable statutory limit			
Brief description: K Pop Merch	\$250.00	\square	\$250.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:8			value, up to any applicable statutory limit			
Brief description:	\$50.00		\$50.00	Haw. Rev. Stat. § 651-121(1)		
Clothing / Wearing Apparel for 2 adult(s) Line from Schedule A/B:11		Ц	100% of fair market value, up to any applicable statutory limit			
Brief description: Watch/jewelry	\$250.00	Ø	\$250.00 100% of fair market	Haw. Rev. Stat. § 651-121(1)		
Line from Schedule A/B:12			value, up to any applicable statutory limit			
Brief description: Cash on Hand	\$500.00	V	\$500.00 100% of fair market	Haw. Rev. Stat. § 651-121(6)		
Line from Schedule A/B:16			value, up to any applicable statutory limit			
Brief description: American Savings Bank (Checking #2080)	\$5,469.17	I	\$5,469.17 100% of fair market	Haw. Rev. Stat. § 651-121(6)		
Line from Schedule A/B: 17.2			value, up to any applicable statutory limit			
Brief description: American Savings Bank (Checking #2354)	\$1,831.51	Ø	\$1,831.51 100% of fair market	Haw. Rev. Stat. § 651-121(6)		
Line from Schedule A/B:17.3			value, up to any applicable statutory limit			

Case number (if known)

Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$114,322.29 \$114,322.29 Haw. Rev. Stat. § 651-124, 431:10- $\overline{\mathbf{Q}}$ Hawaii Ironworkers Trust Fund 100% of fair market 232 value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$27,956.18 Haw. Rev. Stat. § 651-124, 431:10-\$27,956.18 $\overline{\mathbf{V}}$ **Empower Retirement** 100% of fair market value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$2,070.00 \$2,070.00 Haw. Rev. Stat. § 651-124, 431:10- $\sqrt{}$ Hawaii Ironworkers Pension Trust Fund 100% of fair market value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$50,000.00 \$50,000.00 Haw. Rev. Stat. §§ 431:10-234(b) $\overline{\mathbf{Q}}$ Hawaii Ironworkers Trust Fund 100% of fair market Type: whole/universal value, up to any applicable statutory Insured: myself limit Line from Schedule A/B: Brief description: \$100.00 \$100.00 Haw. Rev. Stat. § 651-121(3) $oldsymbol{\sqrt{}}$ 2 desk 100% of fair market value, up to any Line from Schedule A/B: 39 applicable statutory limit Brief description: \$50.00 \$50.00 Haw. Rev. Stat. § 651-121(3) $\overline{\mathbf{A}}$ 2 office chairs 100% of fair market value, up to any Line from Schedule A/B: 39 applicable statutory limit Brief description: \$10.00 \$10.00 Haw. Rev. Stat. § 651-121(3) $\overline{\mathbf{V}}$ computer monitor 100% of fair market value, up to any Line from Schedule A/B: 39 applicable statutory limit Brief description: \$150.00 \$150.00 Haw. Rev. Stat. § 651-121(3) abla**Tools** 100% of fair market value, up to any Line from Schedule A/B: ___40 applicable statutory limit

					ı		
Fill in this inf	ormation to i	dentify your	case:				
Debtor 1	Keith First Name	Tsuyosh Middle Nam					
Debtor 2	Carly	Nicole	Nihei				
(Spouse, if filing)		Middle Nam					
United States Bar	nkruptov Court fo	or the: DISTRIC	T OF HAWAII				
Case number	, ,						
(if known)				_		Check if this is amended filing	
Official Form	106D				l	`	•
		Who Have	Claims Secure	d by Pro	nortv		12/15
			married people are filin py the Additional Page,				
On the top of any	additional page	s, write your na	me and case number (if	known).			
1. Do any credit	ors have claims	s secured by yo	ur property?				
			o the court with your othe	r schedules.	You have not	ning else to report on th	is form.
Yes. Fill	in all of the infor	mation below.					
Part 1: Lis	t All Secured	l Claims					
			than one secured . If more than one	Colun	an A	Column B	Column C
creditor has a	particular claim,	list the other cre-	ditors in Part 2. As		int of claim	Value of collateral	Unsecured
much as poss creditor's nam		ns in alphabetica	I order according to the		of collateral	that supports this claim	portion If any
		Descri	be the property that	Value	or conateral	Cidiiii	папу
2.1		secure	s the claim:		\$4,800.00	\$5,400.00	
Disney Vacation Creditor's name	-	Disne	y Aulani Timeshare				
1851 Community	y Drive						
			he date you file, the claint ntingent	im is: Check	all that apply.		
Lake Buena Vist	ta FL 32830		liquidated				
City	State ZIP Cod		sputed				
Who owes the deb	ot? Check one.	Nature	of lien. Check all that a	apply.			
Debtor 1 only Debtor 2 only		_	agreement you made (su			car loan)	
Debtor 2 only Debtor 1 and D	ebtor 2 only		atutory lien (such as tax li		c's lien)		
At least one of		anathar 	dgment lien from a lawsui ner (including a right to of				
☐ Check if this o		№ 0"	ortgage	1361)			
to a communi							
Date debt was inc	urred 8/12/17	Last 4	digits of account numb	er			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$4,800.00

	· · · · · · · · · · · · · · · · · · ·			Case number (if known)						
Part 1:		_	this page, number them ous page.	Amo Do n	ot ded	f claim duct the ollateral		3 collateral ports this	Column C Unsecured portion If any	
2.2			Describe the property that secures the claim:		\$2	,824.64		\$3,000.00		
Creditor's name PO Box 320 Number Stre	00		2021 Honda CRF125F Dirt bike							
At least of Check if	only only and Debtor 2	eck one. only otors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	mortg	jage c	or secured	l car loan)			
Date debt wa	s incurred	12/2021	Last 4 digits of account number	9	5	<u> 6</u>				
Freedom R Creditor's name Attn: Bankı Number Stre 10509 Profe	ruptcy et	ial	Describe the property that secures the claim: 2021 Honda CRF125F Dirt bike		\$9	,751.00		\$4,000.00	\$5,751.00	
Reno City Who owes tr Debtor 1 Debtor 2 Debtor 1 At least c	NV State ne debt? Ch only only and Debtor 2	89521 ZIP Code eck one. only otors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Recreational	mortg	jage c	or secured	l car loan)			
Date debt wa	s incurred	09/2022	Last 4 digits of account number	6	1_4	<u> 5</u>				
UCC1 reco			sqavarna TE150 for which Joint I	Debto	r is r	not on tit	tle; loan t	o be paid d	irectly by co-	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,575.64

Debtor 1 Debtor 2	Keith Tsuyoshi Carly Nicole Nih		Case number (if known)							
Additional Page Part 1: After listing any entries on sequentially from the previous				Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any				
2.4 Hawaii State FCU Creditor's name PO Box 3072 Number Street			Describe the property that secures the claim: \$200,000.00 \$813,936.00 \$813,936.00 \$813,936.00 \$813,936.00							
Honolulu HI 96802 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt			As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) HELOC							
2.5 Matanuska Creditor's nam	a Valley FCU	30/2022	Last 4 digits of account number Describe the property that secures the claim: 2020 Ford F150 FX	5 <u>3 8 1</u> \$28,842.09	\$31,400.00					
Waipahu HI 96797 City State ZIP Code			As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed							
Who owes the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt			Nature of lien. Check all that apply. ✓ An agreement you made (such as mortgage or secured car loan) ─ Statutory lien (such as tax lien, mechanic's lien) ─ Judgment lien from a lawsuit							

Add the dollar value of your entries in Column A on this page. Write that number here:

Date debt was incurred 08/28/2020 Last 4 digits of account number

\$228,842.09

6 2 8 9

Debtor 1 Debtor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)					
Part 1: Additional Page After listing any entries on sequentially from the previous			Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.6		Describe the property that secures the claim:	\$503,184.72	\$813,936.00			
Rocket Mortgage Creditor's name 1050 Woodward Ave. #1050 Number Street		460 Kamaaha Ave. #22 Kapolei, HI 96707					
Detroit City	MI 48226 State ZIP Code	As of the date you file, the claim is: Contingent Unliquidated Disputed	Check all that apply.				
Who owes the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates		Nature of lien. Check all that apply. ✓ An agreement you made (such as mortgage or secured car loan) ✓ Statutory lien (such as tax lien, mechanic's lien) ✓ Judgment lien from a lawsuit					

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$503,184.72

5 7 8 5

\$749,402.45

to a community debt

Date debt was incurred 12/03/2021

Taxes Included in Payment (per year): \$2,814.72 Insurance Included in Payment (per year): \$801.91

		416					
Fill in this inf	ormation to i	dentify your c	ase:				
Debtor 1	Keith	Tsuyoshi	Nihei				
	First Name	Middle Name	Last Name				
Debtor 2	Carly	Nicole	Nihei				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court fo	or the: DISTRICT	OF HAWAII				
Case number (if known)						Check if this is a amended filing	an
Official Form	106E/F						
Schedule E/	F: Credito	rs Who Have	e Unsecured Claims	3			12/15
If more space is n to this page. On to this page. On to this page. On to this page. On to this page. 1. Do any credit No. Go to Yes. 2. List all of you claim. For each	t All of Your tors have priorit o Part 2. r priority unsec	PRIORITY Unsequence of the property of the pro	creditor has more than one pric	ority unse	ecured claim, list the	ne creditor separat	ely for each m here and
more space is		rity unsecured clair	nuch as possible, list the claims ns, fill out the Continuation Pag				
(For an explar	nation of each tvi	oe of claim. see the	e instructions for this form in the	e instruct	ion booklet.		
` '	,,	,			Total claim	Priority amount	Nonpriority amount
2.1					\$3,010.00	\$3,010.00	\$0.00
Blake Goodman	, PC		Last 4 dinita of account norm				
Priority Creditor's Nam 900 Fort Street I			Last 4 digits of account num	_			
Number Street	viali, #910		When was the debt incurred	? 09	/15/2023	_	
			As of the date you file, the c	laim is:	Check all that app	oly.	
			Contingent			•	
Honolulu	н	96813	☐ Unliquidated ☐ Disputed				
City	State	ZIP Code					
Who incurred the	debt? Check	one.	Type of PRIORITY unsecure				
☐ Debtor 1 only ☐ Domestic support obligations ☐ Debtor 2 only ☐ Taxes and certain other debts you owe the government							
Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were							
	the debtors and	another	intoxicated	,)	jou noio		
☐ Check if this o	claim is for a co	mmunity debt	Other. Specify				
Is the claim subje	ct to offset?		Attorney fees for this	case			
✓ No Yes							

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 Carly Nicole Nihei	Case	Case number (if known)				
Part 1: Your PRIORITY Unsecured C	laims Continuation Page					
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim	Priority amount	Nonpriority amount		
2.2		\$11,148.21	\$11,148.21	\$0.00		
IRS Priority Creditor's Name	- Last 4 digits of account number _					
P.O. Box 7346 Number Street	When was the debt incurred? 20	22				
	- As of the date you file, the claim is: Ontingent Unliquidated	Check all that app	oly.			
Philadelphia PA 19101-7346 City State ZIP Code	- Disputed					
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim	:				
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	 □ Domestic support obligations ☑ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify 					

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 Carly Nicole Nihei	Case number (if known)	
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims	
 Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc 	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the	•
Part 3. If more space is needed for nonpriority of	unsecured claims, fill out the Continuation Page of Part 2.	Total claim
4.1		\$514.30
Affirm, Inc. Nonpriority Creditor's Name 30 Isabella 4th Floor Number Street	Last 4 digits of account number 6 S V U When was the debt incurred? 3/15/2023-3/15/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Pittsburgh PA 15212 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Consumer credit	
Affirm, Inc. Nonpriority Creditor's Name 30 Isabella St. , 4th Floor Number Street	Last 4 digits of account number 3 D S V When was the debt incurred? 11/17/2022-11/17/2022 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$251.08
Pittsburgh PA 15212 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Consumer credit	

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 Carly Nicole Nihei	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	cured Claims Continuation Page	
After listing any entries on this page, number the	hem sequentially from the	Total claim
previous page. 4.3		\$115.20
Affirm, Inc.	Last 4 digits of account number 5 E E B	<u>Ψ115.20</u>
Nonpriority Creditor's Name	When was the debt incurred? 2/23/2023-2/23/2023	
30 Isabella St. , 4th Floor Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Pittsburgh PA 15212	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		
4.4		\$20,420.29
American Express/Delta	Last 4 digits of account number 2 3 8 3	- +20, 120,20
Nonpriority Creditor's Name	When was the debt incurred? 5/31/2023	
P.O. Box 360001 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Fort Lauderdale FL 33336-0001	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	credit card	
Is the claim subject to offset?		
✓ No Yes		
4.5		\$12,432.00
Amex	Last 4 digits of account number 6 2 8 5	
Nonpriority Creditor's Name Correspondence/Bankruptcy	When was the debt incurred? 07/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 981540	Contingent	
	☐ Unliquidated ☐ Disputed	
El Paso TX 79998		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.6 \$8.539.71 Last 4 digits of account number **Bank Of America** 2 8 5 2 Nonpriority Creditor's Name When was the debt incurred? 5/31/2023 PO Box 15019 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Wilmington DE 19886-5019 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only \mathbf{V} that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No Yes П 4.7 \$2,852.78 Last 4 digits of account number **Bank of America** 5 4 Nonpriority Creditor's Name When was the debt incurred? 8/4/2023 PO Box 851001 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed **Dallas** TX 75285-1001 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No

☐ Yes

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.8 \$3.035.00 **Bank of America** Last 4 digits of account number <u>5 4 4 5</u> Nonpriority Creditor's Name When was the debt incurred? 04/2023 Attn: Bankruptcy Street As of the date you file, the claim is: Check all that apply. 4909 Savarese Circle ☐ Contingent Unliquidated ☐ Disputed FL 33634 Tampa City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes **Current Account** \$18.202.00 Last 4 digits of account number 0 0 0 1 **Bank Of Hawaii** Nonpriority Creditor's Name When was the debt incurred? 2018 P.O. Box 2900 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Honolulu н 96846 ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{A}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Personal Loan** Is the claim subject to offset? **☑** No

Yes

Debtor 1 Keith Tsuvoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.10 \$17.420.00 **Bank Of Hawaii** Last 4 digits of account number <u>0 0 0 1</u> Nonpriority Creditor's Name When was the debt incurred? 018 P.O. Box 2900 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Honolulu HI 96846 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Personal Loan** Is the claim subject to offset? **☑** No Yes 4.11 \$19,486.23 Last 4 digits of account number **Barclays** 1 8 0 Nonpriority Creditor's Name When was the debt incurred? 2018-2023 PO Box 8801 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Wilmington DE 19801 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{Q}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No ☐ Yes 4.12 \$14,322.00 **Barclays** Last 4 digits of account number 5 4 7 9 Nonpriority Creditor's Name When was the debt incurred? 2022-2023 PO Box 8801 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated □ Disputed Wilmington DE 19801 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt credit card Is the claim subject to offset? No

Yes

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.13 \$4.479.00 Citi Bank/Best Buy Last 4 digits of account number <u>4</u> <u>7</u> <u>0</u> <u>4</u> Nonpriority Creditor's Name When was the debt incurred? 2022-20223 PO Box 183195 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ☐ Disputed Columbus OH 43218 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No Yes П 4.14 \$3,831.00 Last 4 digits of account number Citibank 3 3 6 1 Nonpriority Creditor's Name When was the debt incurred? 08/2018 Citicorp Cr Srvs/Centralized Bankruptcy Street As of the date you file, the claim is: Check all that apply. PO Box 790040 Contingent Unliquidated Disputed St Louis MO 63179 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{V}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes

Current Account

Account Closed By Consumer

Debtor 1 Keith Tsuvoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$5.885.00 Citibank/The Home Depot Last 4 digits of account number <u>8 8 3 1</u> Nonpriority Creditor's Name When was the debt incurred? 06/2016 Citicorp Cr Srvs/Centralized Bankruptcy As of the date you file, the claim is: Check all that apply. Number PO Box 790040 ☐ Contingent Unliquidated Disputed St Louis MO 63179 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? **☑** No Yes П 4.16 \$12,652.22 Last 4 digits of account number Comenity/Ann Taylor 9 6 7 5 Nonpriority Creditor's Name 2017-2023 When was the debt incurred? PO Box 182273 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed Columbus OH 43218-2273 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{M}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No ☐ Yes 4.17 \$5,802.00 Hawaii State FCU Last 4 digits of account number 5 8 2 0 Nonpriority Creditor's Name When was the debt incurred? 04/2022 Attn: Bankruptcy Street As of the date you file, the claim is: Check all that apply. Number PO Box 3072 Contingent Unliquidated □ Disputed Honolulu НΙ 96802 7IP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Unsecured Is the claim subject to offset? No Yes

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.18 \$5.907.95 **Home Depot Credit Services** Last 4 digits of account number <u>8 8 3 1</u> Nonpriority Creditor's Name When was the debt incurred? 2016-2023 P.O. Box 78011 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **Phoenix** 85062-8011 ΑZ City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No Yes П 4.19 \$3,429.15 Last 4 digits of account number **Macys CBNA** 8 6 7 3 Nonpriority Creditor's Name When was the debt incurred? 2021-2023 P.O. Box 9001094 As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated Disputed 40290-1094 Louisville KY City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only $\overline{\mathbf{V}}$ that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt credit card Is the claim subject to offset? **☑** No

☐ Yes

Debtor 1 Keith Tsuyoshi Nihei Debtor 2 **Carly Nicole Nihei** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.20 \$16.695.00 **Navient** Last 4 digits of account number 1 2 0 5 Nonpriority Creditor's Name When was the debt incurred? 12/2007 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number PO Box 9500 ☐ Contingent Unliquidated ☐ Disputed Wilkes-Barre PΑ 18773 State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ✓ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No Yes **Current Account FIXED RATE** 4.21 \$2.849.00 Synchrony Bank/Money Sport Last 4 digits of account number 2 6 6 3 Nonpriority Creditor's Name When was the debt incurred? 2020-2023 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number PO Box 965060 Contingent Unliquidated Disputed Orlando FL 32896 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? **☑** No ☐ Yes

Current Account

Debtor 1 Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.22		\$2,919.00
Synchrony/Amazon	Last 4 digits of account number 9 7 2 9	
Nonpriority Creditor's Name P.O. Box 960013	When was the debt incurred? 2022-2023	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	──	
Orlando FL 32896-0013	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
$\hfill \square$ Check if this claim is for a community debt	credit card	
Is the claim subject to offset?		
✓ No		
Yes		
4.23		¢2 c0c 00
<u> </u>	Last 4 digits of account number 2 0 0 2	\$2,606.00
Synchrony/Lowes Nonpriority Creditor's Name	Last 4 digits of account number 2 9 0 2	
P.O. Box 530914	When was the debt incurred? 2016-2022	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	Disputed	
Atlanta GA 30353-0914 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	credit card	
Is the claim subject to offset?		
✓ No ✓ Yes		
4.24		\$4,741.00
Synchrony/PayPal Credit	Last 4 digits of account number 0 5 2 6	
Nonpriority Creditor's Name	When was the debt incurred? 03/2018-2023	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Other. Specify Credit Card	
Is the claim subject to offset?		
✓ No		
Yes		

Debtor 1 Debtor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)
Part 2:	Your NONPRIORITY Unsecui	red Claims Continuation Page
After listin	g any entries on this page, number the	m sequentially from the Total claim
4.25		\$140,422.80
	nd Bank/BHG reditor's Name Street Street	Last 4 digits of account number 5 3 4 3 When was the debt incurred? 2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Debtor Debtor Debtor At leas Check	State ZIP Code red the debt? Check one. 1 only	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Loan

✓ No ☐ Yes

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$11,148.21
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. .	+ \$3,010.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$14,158.21
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$16,695.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. .	+ \$313,114.71
	6j.	Total. Add lines 6f through 6i.	6j.	\$329,809.71

Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Keith First Name	Tsuyoshi Middle Name	Nihei Last Name		
Debtor 2	Carly	Nicole	Nihei		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: DISTRICT OF	HAWAII		
Case number (if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill	in this inf	ormation to	identify your case:			
Debt		Keith	Tsuyoshi	Nihei		
		First Name	Middle Name	Last Name		
Debt (Spo	tor 2 ouse, if filing)	Carly First Name	Nicole Middle Name	Nihei Last Name		
			Canada a DISTRICT OF L	1 4 1 4 7 4 1 1		
		nkruptcy Court	for the: DISTRICT OF I	1AVVAII		
_	e number nown)	_				☐ Check if this is an amended filing
	cial Form	106H Your Cod	debtors			12/15
page. 1. D	On the top		nal Pages, write your na	me and case numbe	er (if known	left. Attach the Additional Page to this Answer every question. as a codebtor.)
2. V	ם Vithin the las	-	-		-	(Community property states and territories Washington, and Wisconsin.)
<u> </u>	No. Go to Yes. Did	l your spouse, f	ormer spouse, or legal ec	uivalent live with you	at the time?	
p c	erson show reditor on S	n in line 2 agai Schedule D (Off	in as a codebtor only if t	hat person is a guar dule E/F (Official For	rantor or co	f your spouse is filing with you. List the signer. Make sure you have listed the or <i>Schedule G</i> (Official Form 106G). Use
	Column 1:	Your codebto	or		Co	olumn 2: The creditor to whom you owe the debt
					Ch	neck all schedules that apply:
3.1	Joseph E	Bega				Schedule D, line 2,3
	Name 460 Kam	aaha Ave #22	2			<u> </u>
	Number	Street			L	Schedule E/F, line
					— [Schedule G, line eedom Road Financial
	Kapolei City		HI State	96707 ZIP Code	— ''	Codon Noda i manolai

Fill i	n this inforn	nation to	identify your case:							
Deb	otor 1	Keith	Tsuyoshi		Nihei					
		First Name	Middle Name		Last Name			c	he	ck if this is:
1	otor 2	Carly	Nicole		Nihei			r	7	An amended filing
` .	ouse, if filing)	First Name	Middle Name		Last Name			-	_	A supplement showing postpetition
	ed States Bank	ruptcy Court	for the: DISTRICT OI	F HAWA	All			-	_	chapter 13 income as of the following date:
	e number nown)					_				MM / DD / YYYY
Offici	ial Form 10)6I								WINI / DD / TTTT
	edule I: Yo		ma							12/15
30116	dule I. To	ul ilicoi	116							12/13
about y	your spouse. If ame and case i	f more spac	e is needed, attach a se nown). Answer every q	parate s	heet to th			-	-	ou, do not include information any additional pages, write
	II in your emplo	oyment								
	formation. you have more t	than one		Debto	r 1					Debtor 2 or non-filing spouse
job	o, attach a sepa	rate page	Employment status	_	mployed					✓ Employed
	th information a Iditional employ			_	ot employe	ed				☐ Not employed
			Occupation	Journ	iyman					UM Nurse
	clude part-time, self-employed v		Employer's name	СМС	Steel Fab	rca	itors			Agilon Health Inc.
	ccupation may i		Employer's address		6 Kalaelo	а В	lvd.			6210 E. Highway 290, Ste. 450
	pplies.	iakei, ii ii		Numbe	r Street					Number Street
				Каро	lei		ні	96707		Austin TX 78723
				City			State	Zip Code		City State Zip Code
			How long employed th	here?	22 year	s		_		4 years
Part	2: Give I	Details Δh	out Monthly Incom	Δ						
			•		h			. 		weeks 00 in the consequence backed account
	ng spouse unles			n. ir you	nave noth	ng i	o repor	t for any ii	ne,	, write \$0 in the space. Include your
•	, ,	•	e more than one employerarate sheet to this form.	er, comb	ine the info	rma	ation for	all emplo	yer	rs for that person on the lines below. If
							For [Debtor 1		For Debtor 2 or non-filing spouse
pa			alary, and commissions d monthly, calculate what			2.		\$8,851.8	7	\$8,816.38
3. Es	stimate and list	monthly ov	ertime pay.			3.	+	\$0.0	0	\$0.00

Calculate gross income. Add line 2 + line 3.

\$8,851.87

\$8,816.38

Case number (if known)

			Fo	or Debtor 1		r Debtor on-filing s		,	
	Cop	y line 4 here	4.	\$8,851.87		\$8,81		_	
5.		all payroll deductions:		Ψ0,00	-	ΨΟ,Ο	0.00		
J.		Tax, Medicare, and Social Security deductions	5a.	\$2,161.77		\$1,589	9.37		
		Mandatory contributions for retirement plans	5a. ₋ 5b.	\$0.00	-		0.00		
		Voluntary contributions for retirement plans	5c.	\$0.00	-		0.00		
	5d.	Required repayments of retirement fund loans	5d.	\$0.00	-		0.00		
	5e.	Insurance	5e.	\$5.42	-		5.77		
	5f.	Domestic support obligations	5f.	\$0.00	-		0.00		
	5g.	Union dues	5g.	\$40.65	-		0.00		
	•	Other deductions.	og	+ 10.00	-	<u> </u>			
	JII.	Specify: Life & Accident Ins.	5h. +	\$0.00	-	\$3	3.99		
6.	Add 5g +	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$.	6.	\$2,207.84	=	\$1,719	9.13		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$6,644.03	_	\$7,097	7.25		
8.	List	all other income regularly received:	_						
	8a.	Net income from rental property and from operating a	8a.	\$0.00		\$(0.00		
		business, profession, or farm	-		_				
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00		\$(0.00		
	8c.	Family support payments that you, a non-filing spouse, or a	8c.	\$0.00	_	\$(0.00		
		dependent regularly receive	-		-				
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00		\$(0.00		
	8e.	Social Security	8e.	\$0.00	-	\$(0.00		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$0.00		¢	0.00		
	0~		-		-		0.00		
	_	Pension or retirement income	8g. ₋	\$0.00	-	\$(0.00		
	OII.	Other monthly income. Specify:	8h.+	\$0.00	_	\$(0.00		
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	_	\$	0.00		
								I Г	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$6,644.03	+	\$7,09	7.25	=	\$13,741.28
11.	Inclu	e all other regular contributions to the expenses that you list in Soude contributions from an unmarried partner, members of your househ ds or relatives.			ur roo	mmates,	and otl	ner	
	Do r	not include any amounts already included in lines 2-10 or amounts that	t are not	available to pay	exper	nses listed	d in Sc	hed	ule J.
	Spe	cify:					11.	+	\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities					12.		\$13,741.28
		applies.	and oo	rain canonour ii					Combined monthly income
13.	Doy	ou expect an increase or decrease within the year after you file t	his form	?					
	$\overline{\mathbf{V}}$	No. None.							
		Yes. Explain:							
	_								

G	ill in this inforn	nation to ide	ntify y	our case:			Oh a	_l, :£ 4 _:_		
	Debtor 1	Keith		Tsuyoshi	Nihei		l <u> </u>	ck if this	s is: ended filing	
	Debior 1	First Name		Middle Name	Last Na	me	믐		lement showing	postpetition
	Debtor 2	Carly		Nicole	Nihei		╽╙	chapte	r 13 expenses a	
	(Spouse, if filing)	First Name		Middle Name	Last Na	me		followir	ng date:	
	United States Bank	ruptcy Court for	the: D	ISTRICT OF H	AWAII			MM / D	D / YYYY	_
	Case number (if known)									
0	fficial Form 10)6J								
S	chedule J: Yo	our Expens	ses							12/1
nai	rrect information. I	f more space is	needed Answer	d, attach anothe every question.		ing together, both ar his form. On the top				
1.	Is this a joint cas	e?								
2	No □ Ye	Debtor 2 live in a	st file Off	ate household?	2, Expenses	s for Separate Housel	hold of	f Debtor	2.	
2.	Do you have dep Do not list Debtor			. Fill out this info		Dependent's relation		p to	Dependent's age	Does dependent live with you?
	Debtor 2.		101 6	each dependent.		child			15	□ No
	Do not state the d	ependents'				child			13	- ☑ Yes □ No - ☑ Yes
						child			8	□ No - ☑ Yes □ No
										Yes No Yes Yes
3.	Do your expense expenses of peopyourself and you	ple other than		No Yes						
Ŀ	Part 2: Estima	ate Your Ong	going I	Monthly Expe	enses					
to		of a date after	the ban		-	re using this form as supplemental Sche			-	
	clude expenses paid th assistance and l								Your expens	es
4.	The rental or hon Include first mortg							4	4	\$3,064.14
	If not included in		-	-						
	4a. Real estate to	axes						4	4a	
	4b. Property, hor	neowner's, or re	nter's ins	surance				4	4b	
	4c. Home mainte	enance, repair, a	ınd upke	ep expenses				4	4c	\$503.19
	4d. Homeowner's	s association or	condomi	inium dues					4d.	

Case number (if known)

		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	\$666.78
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$350.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$483.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$1,500.00
8.	Childcare and children's education costs	8.	\$316.00
9.	Clothing, laundry, and dry cleaning	9.	\$260.00
10.	Personal care products and services	10.	\$150.00
11.	Medical and dental expenses	11.	\$395.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12	\$500.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$200.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$134.00
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 2018 Ford F150	17a	\$635.89
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify: Disney Timeshare dues	17c	\$37.92
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Debtor 1 Debtor 2		Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known) _	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c.	_
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	Specify:	21. +	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$9,195.92
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$9,195.92
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$13,741.28
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$9,195.92
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$4,545.36
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		kample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mort		
	ت	No. Yes. Explain here: None.		

Fill in this inf	ormation to i	dentify your case	:			
Debtor 1	Keith First Name	Tsuyoshi Middle Name	Nihei Last Name			
Debtor 2	Carly	Nicole	Nihei			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court fo	or the: DISTRICT OF	HAWAII			
Case number					П	Check if this i
(if known)					–	amended filii

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone who	is NOT an attorney to help you fill out bar	nkruptcy forms?
☑ No		
Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I hat true and correct.	ive read the summary and schedules filed	with this declaration and that they are
X /s/ Keith Tsuyoshi Nihei Keith Tsuyoshi Nihei, Debtor 1	X /s/ Carly Nicole Nihei Carly Nicole Nihei, Debtor 2	
Date <u>09/28/2023</u> MM / DD / YYYY	Date <u>09/28/2023</u> MM / DD / YYYY	

						Chacker	live ete el i n line e d	7 and 24.
Fill in this i	nformation to ide	entify your ca	ise:			Check as c	directed in lines 1	<i>r</i> and 21:
Debtor 1	Keith	Tsuyoshi		Nihei		According to t	he calculations require	d by this
	First Name	Middle Name		Last Name			-1- : :	
Debtor 2 (Spouse, if filir	Carly First Name	Nicole Middle Name		Nihei Last Name			ole income is not deter U.S.C. § 1325(b)(3).	mined
	Bankruptcy Court for t		OF HAV			2. Disposal	ole income is determine U.S.C. § 1325(b)(3).	ed
0						☐ 3 The com	mitment period is 3 ye	are
Case number (if known)	-					-	mitment period is 5 ye	
						4. 1110 00111	Third period is 6 year	
Official For	m 122C-1					☐ Check if th	iis is an amended filing	J
	3 Statement of lation of Com			onthly Inc	ome			10/
							responsible for being	
nformation app	ore space is needed, plies. On the top of a	ny additional pa	ages, wi	rite your name a				
	ur marital and filing							
☐ Not m	narried. Fill out Colum	n A, lines 2-11.						
	ed. Fill out both Colun	•	s 2-11.					
bankruptc August 31. in the resul	y case. 11 U.S.C. § 1 If the amount of your	101(10A). For exmonthly income income amount in	cample, i varied d more tha	f you are filing o luring the 6 mon n once. For exa	n Septemb ths, add the mple, if bo	er 15, the 6-montle e income for all 6 th spouses own th	nonths before you file in period would be Marc months and divide the ne same rental property space.	ch 1 through total by 6. Fil
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
-	s wages, salary, tips, payroll deductions).	bonuses, overt	ime, and	d commissions		\$8,851.88	\$8,816.38	
. Alimony a	nd maintenance payr	nents. Do not in	nclude pa	ayments from a	spouse.	\$0.00	\$0.00	
expenses regular con your depen	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.				\$0.00	\$0.00		
. Net incom	e from operating a bu	usiness, profess	sion, or	farm				
		Debtor 1		Debtor 2				
Gross rece deductions	ipts (before all)	\$0	.00	\$0.00				
Ordinary ar expenses	nd necessary operating	g _	.00_	\$0.00	Сору			
Net monthl	y income from a busin	ess, \$0	.00	\$0.00	here -	\$0.00	\$0.00	

profession, or farm

7. 8. Case number (if known)

Column A
Debtor 1

Column B

Debtor 2 or
non-filing spouse

6. Net income from rental and other real property

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00	\$0.00			
Ordinary and necessary operating expenses	\$0.00	\$0.00	Сору		
Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	\$0.00
Interest, dividends, and royalties			_	\$0.00	\$0.00
Unemployment compensation				\$0.00	\$0.00
Do not enter the amount if you conte benefit under the Social Security Ac				· · · · · ·	
For you		\$0.	00		
For your spouse		\$0.	00		
Pension or retirement income. Do	not include any am	ount received that	t	\$0.00	\$0.00

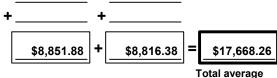
- Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.
- 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

11. Calculate your total average monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.



monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$17,668.26

	tor 1 tor 2		eith Tsuyoshi Nihei arly Nicole Nihei	Case num	ber (if known)			
13.	Calc	ulate	the marital adjustment. Check one:					
	П	You a	are not married. Fill in 0 below.					
	$\overline{\mathbf{Q}}$	You a	are married and your spouse is filing with you.	Fill in 0 below.				
	\Box	You a	are married and your spouse is not filing with yo	ou.				
	_		the amount of the income listed in line 11, Col					
			u or your dependents, such as payment of the	spouse's tax liability or the spouse's s	upport of someone other			
			you or your dependents. w, specify the basis for excluding this income a	nd the amount of income devoted to	each nurnose. If			
			ssary, list additional adjustments on a separate		sacri purpose. II			
		If this	adjustment does not apply, enter 0 below.					
		_		+				
		Total		\$0.00	Copy here	\$0.00		
14.	You	r curr	ent monthly income. Subtract the total in line	e 13 from line 12.		\$17,668.26		
15.	Calc	ulate	your current monthly income for the year.	Follow these steps:				
	15a.	Cop	by line 14 here 😝			\$17,668.26		
		Mul	tiply line 15a by 12 (the number of months in a	year).		X 12		
	15b.	The	e result is your current monthly income for the y	ear for this part of the form		\$212,019.12		
16.	Calc	ulate the median family income that applies to you. Follow these steps:						
	16a.	Fill	in the state in which you live.	Hawaii				
	16b.	Fill	in the number of people in your household.	5				
	16c.		in the median family income for your state and			\$135,521.00		
			find a list of applicable median income amounts ructions for this form. This list may also be ava					
17.	How	do th	ne lines compare?					
	17a.		Line 15b is less than or equal to line 16c. On	the top of page 1 of this form, check	hoy 1 Disnosable income is	not determined		
	174.	Ц	under 11 U.S.C. § 1325(b)(3). Go to Part 3.		•			
	17b.		Line 15b is more than line 16c. On the top of					
			11 U.S.C. § 1325(b)(3). Go to Part 3 and fill On line 39 of that form, copy your current mor	•	Income (Official Form 1220	C-2).		
Pá	art 3		Calculate Your Commitment Period	Under 11 U.S.C. § 1325(b)(4)				
18.	Сор	y you	r total average monthly income from line 11.			\$17,668.26		
19.			e marital adjustment if it applies. If you are ating the commitment period under 11 U.S.C. §					
			opy the amount from line 13.	5 .025(B)(T) allows you to doubt part	or your opouted			
	19a.	If th	e marital adjustment does not apply, fill in 0 on	line 19a		\$0.00		
	19b.	Sul	otract line 19a from line 18.			\$17,668.26		

Debtor 1 Debtor 2		Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)		
20.	Calculate your current monthly income for the year. Fo		Follow these steps:		
	20a.	Copy line 19b		\$17,668.26	
		Multiply by 12 (the number of months in a year).		X 12	
	20b.	The result is your current monthly income for the	year for this part of the form.	\$212,019.12	
	20c.	nd size of household from line 16c.	\$135,521.00		
21.	How	do the lines compare?			
	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.				
	_	Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period</i>	s otherwise ordered by the court, on the top of page 1 is 5 years. Go to Part 4.		
Р	art 4	Sign Below			
	By s	igning here, under penalty of perjury I declare that	the information on this statement and in any attachments is true	and correct.	
	X /s	s/ Keith Tsuyoshi Nihei	★ /s/ Carly Nicole Nihei		
	K	Ceith Tsuyoshi Nihei, Debtor 1	Carly Nicole Nihei, Debtor 2	_	
	С	Date 9/28/2023	Date 9/28/2023		
		MM / DD / YYYY	MM / DD / YYYY		

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this inf	ormation to ide	entify your case	e:		
Debtor 1	Keith First Name	Tsuyoshi Middle Name	Nihei Last Name	_	
Debtor 2	Carly	Nicole	Nihei		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the: DISTRICT OF HAWAII					
Case number					
(if known)					

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/22

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

5

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$2,349.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$79.00				
7b. Number of people who are under 65	x5	Copy			
7c. Subtotal. Multiply line 7a by line 7b.	\$395.00	here -	\$395.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$154.00				
7e. Number of people who are 65 or older	x	Сору			
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	here →	+\$0.00	Copy	
7g. Total. Add lines 7c and 7f			\$395.00	here -	\$395.00

Debto Debto		Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)	
Loc	al St	andards You must use the IRS Local S	Standards to answer the questions in lines 8-15.	
		n information from the IRS, the U.S. Trustee ruptcy purposes into two parts:	Program has divided the IRS Local Standard for housing	
		ing and utilities Insurance and operating e	•	
the	link	•	rustee Program chart. To find the chart, go online using s form. This chart may also be available at the	
8.		using and utilities Insurance and operating n the dollar amount listed for your county for ins	g expenses: Using the number of people you entered in line 5, surance and operating expenses.	\$1,006.00
9.	Hou	using and utilities Mortgage or rent expens	ses:	
	9a.	Using the number of people you entered in line for your county for mortgage or rent expenses.		
	9b.	Total average monthly payment for all mortgag your home.	ges and other debts secured by	
		To calculate the total average monthly paymer contractually due to each secured creditor in the bankruptcy. Next divide by 60.		
		Name of the creditor	Average monthly payment	
		Hawaii State FCU	\$666.78	
		Rocket Mortgage	\$3,063.14	
			+	
		9b. Total average monthly payment	\$3,729.92 Copy here - \$3,729.92 Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.		
		Subtract line 9b (total average monthly payme rent expense). If this number is less than \$0,		\$0.00
10.			ision of the IRS Local Standard for housing is incorrect enses, fill in any additional amount you claim.	
	Exp	olain		
11.		cal transportation expenses: Check the number0. Go to line 14.1. Go to line 12.2 or more. Go to line 12.	per of vehicles for which you claim an ownership or operating expense.	

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$486.00

Debto Debto		Tsuyoshi Nihei Nicole Nihei		Case number (if known)	
13.	expense for e	ership or lease expense: Using the IRS each vehicle below. You may not claim the ln addition, you may not claim the expens	ne expense if you do not m	ake any loan or lease paym	
	Vehicle 1	Describe Vehicle 1: 2020 Ford F1	50 FX		
	13a. Ownersł	hip or leasing costs using IRS Local Stand	dard	\$629.00	
	13b. Average	e monthly payment for all debts secured b	y Vehicle 1.		
	Do not i	nclude costs for leased vehicles.			
	amounts	ulate the average monthly payment here a s that are contractually due to each secure u file for bankruptcy. Then divide by 60.		ıs	
	Name	of each creditor for Vehicle 1	Average monthly payment		
	Matanı	uska Valley FCU	\$480.70		
			+		
		Total average monthly payment	\$480.70 Copy	→\$480.70	Repeat this amount on line 33b.
		icle 1 ownership or lease expense. t line 13b from line 13a. If this number is	less than \$0, enter \$0	\$148.30	Copy net Vehicle 1 expense here \$148.30
	Vehicle 2	Describe Vehicle 2:			
	13d. Ownersł	nip or leasing costs using IRS Local Stand	dard		
	_	e monthly payment for all debts secured b r leased vehicles.	y Vehicle 2. Do not include	е	
	Name	of each creditor for Vehicle 2	Average monthly payment		
		Total average monthly payment	Copy	·	Repeat this amount on line 33c.
		icle 2 ownership or lease expense. t line 13e from 13d. If this number is less	than \$0, enter \$0		Copy net Vehicle 2 expense
14		portation expense: If you claimed 0 veh		RS Local Standards fill in t	here \$0.00 the Public \$0.00

Transportation expense allowance regardless of whether you use public transportation.

Debto Debto		Case number (if known)				
15.		claimed 1 or more vehicles in line 11 and if you claim that you may nay fill in what you believe is the appropriate expense, but you may blic Transportation.	\$0.00			
Oth	er Necessary Expenses In addition to the exp following IRS catego	pense deductions listed above, you are allowed your monthly expenses ries.	for the			
16.	employment taxes, Social Security taxes, and Med	pay for federal, state and local taxes, such as income taxes, self- icare taxes. You may include the monthly amount withheld from preceive a tax refund, you must divide the expected refund by 12 mount that is withheld to pay for taxes.	\$3,603.37			
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.					
18.	B. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 					
20.	 Education: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 					
21.	1. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.					
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					
23.	3. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					
24.	Add all of the expenses allowed under the IRS ended lines 6 through 23.	expense allowances.	\$8,568.24			
Add	•	ional deductions allowed by the Means Test. clude any expense allowances listed in lines 6-24.				
25.	Health insurance, disability insurance, and heal	th savings account expenses. The monthly expenses for health accounts that are reasonably necessary for yourself, your				
	Health insurance	\$70.92				
	Disability insurance	\$0.00				
	Health savings account	\$0.00				
	Total	\$70.92 Copy total here	\$70.92			
	Do you actually spend this total amount?					
	No. How much do you actually spend?✓ Yes					
26.	will continue to pay for the reasonable and necessar member of your household or member of your imm	Id or family members. The actual monthly expenses that you ary care and support of an elderly, chronically ill, or disabled ediate family who is unable to pay for such expenses. These of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$0.00			

Debto Debto		Keith Tsuyoshi Nihei Carly Nicole Nihei Case number (if known)		
27.	safety	ction against family violence. The reasonably necessary monthly expenses that you incur to maintain the of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. w, the court must keep the nature of these expenses confidential.		\$0.00
28.	Addit on line	ional home energy costs. Your home energy costs are included in your insurance and operating expenses e 8.		
	•	believe that you have home energy costs that are more than the home energy costs included in expenses on then fill in the excess amount of home energy costs.		
		nust give your case trustee documentation of your actual expenses, and you must show that the additional nt claimed is reasonable and necessary.		
29.	\$189.	ation expenses for dependent children who are younger than 18. The monthly expenses (not more than 58* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or elementary or secondary school.	_	\$0.00
		nust give your case trustee documentation of your actual expenses, and you must explain why the amount ed is reasonable and necessary and not already accounted for in lines 6-23.		
	* Subj	ject to adjustment on 4/01/25, and every 3 years after that for cases begun on or after the date of adjustment.		
30.	highe	ional food and clothing expense. The monthly amount by which your actual food and clothing expenses are r than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more 5% of the food and clothing allowances in the IRS National Standards.		\$81.00
		d a chart showing the maximum additional allowance, go online using the link specified in the separate ctions for this form. This chart may also be available at the bankruptcy clerk's office.		
	You m	nust show that the additional amount claimed is reasonable and necessary.		
31.		nuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial ments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).	+_	\$0.00
	Do no	t include any amount more than 15% of your gross monthly income.		
32.		all of the additional expense deductions. nes 25 though 31.		\$151.92

Debtor 1 Debtor 2			Keith Tsuyoshi Nihei Carly Nicole Nihei Case nu							umber (if known)		
Ded	uction	s for	Debt Payment									
33. For debts that are secured by an interest in property that you own, including ho loans, and other secured debt, fill in lines 33a through 33e.							g home	m	nortgages, vehic	le		
	To calculate the total average monthly puther 60 months after you file for bankrupt				yment, add all amounts that are contractually due to each secu y. Then divide by 60.					e to each secure	d creditor in	
									erage monthly yment			
	220		tgages on your		·····				\$3,729.92			
	33a.		ns on your first						7			
	33b.		-						\$480.70			
	33c.		•						\$0.00			
	33d.		other secured de									
	Name of each creditor for other secured debt Disney Vacation Development First Hawaiian Bank		Identify property that Does paymen include taxes insurance?			taxes o						
			Disney Aulani	Timeshare	re ☑ No ☐ Yes —			\$101.40				
			2021 Honda CRF125F Dirt bi			No Yes		\$59.67				
	Free	dom	Road Financi	al	2021 Honda CF	RF125F Dir	rt bi ☑	No Yes	+	\$162.52		
	33e.	Tota	l average month	nly payment. A	Add lines 33a through 33d		[\$4,534.21	Copy total here →	\$4,534.21		
34.		•	•		secured by your port of your depe		sidence, a	a vehic	le,	, or other prope	rty	
	п	No. Go to line 35.										
	<u></u>	res.	,	,	ust pay to a credito called the cure am	•		,			•	
Nan	ne of th	ne cre	editor	Identify pro secures the		Total cur amount	e			Monthly cure amount		
							÷	60 =				
								60 =				
							÷	60 =	+			
								Total		\$0.00	Copy total here →	\$0.00
35.	35. Do you owe any priority claimssuch alimonythat are past due as of the fil 11 U.S.C. § 507.								_		•	
	No. Go to line 36.✓ Yes. Fill in the total amount of all of current or ongoing priority claim											
	Total amount of all past-due			oriority claims					\$14,158.21	÷ 60 =	\$235.97	

Debtor 1 Debtor 2

Debto Debto	· · · · · · · · · · · · · · · · · · ·	Case number (if known)									
36.	Projected monthly Chapter 13 plan payment	\$4,321.00									
	Current multiplier for your district as stated on the list issued by the Administra Office of the United States Courts (for districts in Alabama and North Carolina by the Executive Office for United States Trustees (for all other districts).										
	To find a list of district multipliers that includes your district, go online using the specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.		%								
	Average monthly administrative expense	\$432.10	Copy total here	\$432.10							
37.	Add all of the deductions for debt payment. Add lines 33e through 36.			\$5,202.28							
Tota	al Deductions from Income										
38.	Add all of the allowed deductions.										
	Copy line 24, All of the expenses allowed under IRS expense allowances	\$8,568.24									
	Copy line 32, All of the additional expense deductions	\$151.92									
	Copy line 37, All of the deductions for debt payment	+ \$5,202.28									
	Total deductions	\$13,922.44	Copy total here	\$13,922.44							
	Determine Your Disposable Income Under 11 U.S.C. § Copy your total current monthly income from line 14 of Form 122C-1, Cha	apter 13		\$17,668.26							
40.	Statement of Your Current Monthly Income and Calculation of Commitment Period. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part 1 of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.										
41.	Fill in all qualified retirement deductions. The monthly total of all amounts your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loaf from retirement plans, as specified in 11 U.S.C. § 362(b)(19).										
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here	→ \$13,922.44									
43.	expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detaile	Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.									
	Describe the special circumstances Amount of expense										
	+ <u></u>										
	Total \$0.00	Copy									

Debto Debto		Tsuyos Nicole	shi Nihei Nihei		Case number (if kno	own)	
44.	Total adjustr	ments.	Add lines 40 through 43		\$14,175	.96 Copy	\$14,175.96
45.	Calculate yo	ur mont	hly disposable income under §	1325(b)(2). Subtract lin	ne 44 from line 39.		\$3,492.30
Par	t 3: Cha	ınge in	Income or Expenses				
46.	virtually certa information be	in to cha elow. Fo	r expenses. If the income in For nge after the date you filed your or example, if the wages reported blumn, explain why the wages inc	bankruptcy petition and increased after you filed	during the time your cas d your petition, check 12	se will be open 22C-1 in the fir	, fill in the st column, enter
	Form	Line	Reason for change		Date of change	Increase or decrease?	Amount of change
	☐ 122C-1 ☐ 122C-2					Increase	
	☐ 122C-1 ☐ 122C-2					Increase Decreas	
	☐ 122C-1 ☐ 122C-2					Increase Decrease	
	122C-1					Increase Decrease	
Par	t 4: Sign	n Belov	v				
	By signing he	ere, unde	r penalty of perjury you declare th	nat the information on th	is statement and in any	attachments i	s true and correct.
	X /s/ Keith		shi Nihei nei, Debtor 1		Carly Nicole Nihei	2	
	Date 9/2				te 9/28/2023 MM / DD / YYYY		

Debtor 1	Keith First Name	dentify your case Tsuyoshi Middle Name	Nihei Last Name		
Debtor 2	Carly ing) First Name	Nicole Middle Name	Nihei Last Name	_	
United States Case number	Bankruptcy Court fo	or the: DISTRICT OF		— ☐ Check if this is an	
(if known)				amended filing	
Official Fo	rm 107				
Statemen	t of Financia	Affairs for Ind	lividuals Filing for	Bankruptcy	04/22
orrect inform	ation. If more space	e is needed, attach a	separate sheet to this forr	n. On the top of any additional pages, write	
our name an	`	nown). Answer every out Your Marital S	question. Status and Where You	Lived Before	
Part 1: What is y	Give Details Ab	out Your Marital S	•	Lived Before	
Part 1: . What is y Marrie Not m During th	Give Details Ab our current marital ed narried ee last 3 years, have	out Your Marital S status?	•	now?	

Washington, and Wisconsin.)

✓ No✓ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Debtor 2		Keith Tsuyoshi Nihei Carly Nicole Nihei Case number (if known)									
Р	art 2:	Explain the So	urces of Yo	our Income							
4.	Fill in th	ne total amount of inco	ome you receiv	ent or from operating a bed from all jobs and all bucome that you receive tog	sinesses, including part		lendar years?				
	□ No ✓ Yes	s. Fill in the details.									
				Debtor 1		Debtor 2					
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ary 1 of the current your the state of the current you filed for bankruptcy	y :	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$70,977.02	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$73,000.94				
		endar year: o December 31, 202	2)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$111,088.74	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$100,135.55				
		endar year before that o December 31, 202		✓ Wages, commissions, bonuses, tips✓ Operating a business	\$137,365.27	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$100,000.00				
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.											

	Keith Tsuyoshi Nihei Carly Nicole Nihei Case number (if known)											
Part 3:	List Certain Paym	nents You Ma	de Before \	You Filed for Ba	nkruptcy							
	er Debtor 1's or Debtor				- -							
□ No.	Neither Debtor 1 nor "incurred by an individ	-	-			I in 11 U.S.C. § 101(8) as						
	During the 90 days be	fore you filed for	bankruptcy, di	d you pay any credit	or a total of \$7,575* (or more?						
		•	, ,									
	No. Go to line 7.											
	total amount	you paid that cre	editor. Do not i	nclude payments for	nore in one or more p domestic support ob attorney for this bank	ligations, such as						
	* Subject to adjustmen	nt on 4/01/25 and	l every 3 years	after that for cases	filed on or after the d	ate of adjustment.						
⊘ Yes.	Debtor 1 or Debtor 2	or both have pr	imarily consu	mer debts.								
_	During the 90 days be	fore you filed for	bankruptcy, di	d you pay any credit	or a total of \$600 or r	nore?						
	□ No. Go to line 7. □											
		not include paym	nents for dome		ons, such as child su							
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for						
Rocket Mor	tgage		_	\$9,189.42	\$501,997.06	_ Mortgage						
Creditor's name 1050 Woods	ward Avo		Monthly p	ayments		Car						
Number Street			-			☐ Credit card ☐ Loan repayment						
			_			Suppliers or vendors						
Detroit	MI	48226				Other						
City	State	ZIP Code	_									
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for						
Matanuska	Valley FCU		_	\$1,907.67	\$28,842.09	Mortgage						
Creditor's name	ington HWY #144		Monthly p	ayments		☑ Car						
Number Street			-			Credit card						
						☐ Loan repayment ☐ Suppliers or vendors						
Waipahu	HI	96707	=									
City	State	ZIP Code	_			Other						
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for						
	pay (Cordoba Legal))	_	\$3,464.73		Mortgage						
Creditor's name	24man4 04= 050		8/8/2023			Car						
Number Street	Street Ste. 252		=			Credit card						
						Loan repayment						
Bees Bet		22422	=			Suppliers or vendors						
Boca-Raton City	FL State	33432 ZIP Code	_			Other						

	otor 1 otor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei		Case number (if known)						
				Dates of payment	Total amount paid	Amount you still owe	Was this paym	ent for		
		ate FCU		\$2,000.34 \$200			_ Mortgage			
	ditor's nan		_	Monthly p	ayments		Car			
_	ber St	rrington Hwy #140 treet					Credit card			
							Loan repay			
Ka	polei	HI	96707				☐ Suppliers o ☐ Other	rvendors		
City	polei	State	ZIP Code				D Other			
8.	corpora agent, such a No Ye Within benefi Include	es. List all payments to an in a second of the second of t	officer, director, positions you operate as /. nsider. or bankruptcy, director, positions you operate as /. nteed or cosigned enefited an inside	erson in cont a sole propri d you make I by an inside	rol, or owner of 20% etor. 11 U.S.C. § 10	or more of their votir 01. Include payments ansfer any property	ng securities; and a	any managing port obligations		
			•	•						
9.	List all modified	 1 year before you filed for such matters, including per cations, and contract disputes Fill in the details. 	rsonal injury case	•	•	•	•	•		
Cas	se title		Nature of the c	ase	Cour	t or agency	St	atus of the case		
		Healthcare Group, LLC	Assumpsit		•	reme Court of the	State of New	⊘ Pending		
vs.	Keith	Nihei & Carly Nihei			York Court	K Name				
						nty of Onondaga		☐ On appeal		
Cas	se numb	er <u>008665/2023</u>			Numb	er Street		Concluded		
					City	S	State ZIP Code			

Debtor 1 Debtor 2		Keith Tsuyoshi Nihei Carly Nicole Nihei Case number (if known)					
10.	seized,	1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, or levied? all that apply and fill in the details below.					
		Go to line 11. Fill in the information below.					
11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?							
	✓ No ☐ Yes	s. Fill in the details.					
12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	✓ No ☐ Yes						
Pa	art 5:	List Certain Gifts and Contributions					
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?					
		- your a second you men to a summapooy, and you give any give man a second or more a man you per person.					
	☑ No	Fill in the details for each gift.					
14.	✓ No ☐ Yes	E. Fill in the details for each gift. 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600					
14.	✓ No Yes Within 2 to any o	E. Fill in the details for each gift. 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600					
	✓ No Yes Within 2 to any o	Fill in the details for each gift. 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 charity?					
Pa	✓ No ☐ Yes Within 2 to any o ☐ Yes ✓ No ☐ Yes Art 6: Within 2	E. Fill in the details for each gift. 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 charity? 5. Fill in the details for each gift or contribution.					

Debtor 1 Debtor 2		Keith Tsuyoshi Nihei Carly Nicole Nihei		Case number (if known)					
P	art 7:	List Certain F	Payments or	Transfers					
16.	anyone	you consulted ab	out seeking ba	ptcy, did you or anyone else acting on your behalf pay on nkruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services require					
	□ No ☑ Yes	s. Fill in the details.							
Blake Goodman, PC Person Who Was Paid				Description and value of any property transferred Attorney's fees	Date payment or transfer was made	Amount of payment			
900 Fort Street Mall, #910 Number Street				_	09/15/2023	\$1,990.00			
Hoi City	nolulu	HI State	96813 ZIP Code	-					
Ema	il or websi	te address		_					
Pers	on Who M	lade the Payment, if No	t You	_					
.,.	Do not	who promised to	help you deal v	ptcy, did you or anyone else acting on your behalf pay on with your creditors or to make payments to your creditor to you listed on line 16.		perty to			
	rdoba L	egal		Description and value of any property transferred Debt negotiation services; 4 monthly payments made in the amount of \$3,464.73 a month	Date payment or transfer was made	Amount of payment			
Num	iber Str	eet		-	5/8/23-8/823	\$13,858.92			
City		State	ZIP Code	-					
18.		-		uptcy, did you sell, trade, or otherwise transfer any proprise of your business or financial affairs?	perty to anyone, ot	her than			
		•		s made as security (such as granting of a security interest o have already listed on this statement.	r mortgage on your	property).			
	✓ No ☐ Yes	s. Fill in the details.							
19.	you are	-		cruptcy, did you transfer any property to a self-settled truencalled asset-protection devices.)	ust or similar devid	ce of which			
		s. Fill in the details.							

Debtor 1 Debtor 2		Keith Tsuyo Carly Nicole					Case number (Case number (if known)			
Р	art 8:	List Certa	in Fi	nancial Acc	ounts, Inst	rument	s, Sa	fe Deposit Boxes, a	nd Storage Units		
20.	benefit Include houses No	, closed, sold,	move ngs, m , coop	d, or transferr	ed? or other financi	ial accoun	ıts; cer	ounts or instruments hel tificates of deposit; share stitutions.		•	
					Last 4 digits number	s of accou	unt	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
Bank of Hawaii Name of Financial Institution 4480 Kapolei Pkwy, Ste 700 Number Street				6 2	3	Checking Savings Money market Brokerage	6/6/2023	\$2,353.88			
Ka Citv	polei		tate	96707 ZIP Code	_			Other			
- ,	for sec No		did yo	ou have within	1 year before	e you filed	l for b	ankruptcy, any safe dep	osit box or other dep	pository	
22.	☑ No		•	n a storage ur	nit or place oth	her than y	our h	ome within 1 year before	e you filed for bankru	iptcy?	
Р	art 9:	Identify P	rope	rty You Hol	d or Contro	ol for Sc	meo	ne Else			
23.	-	hold or contro	_		someone else	e owns?	Includ	le any property you bori	owed from, are stori	ng for,	
	✓ No ☐ Yes	s. Fill in the det	ails.								

	otor 1 otor 2	Keith Tsuyoshi Nihei Carly Nicole Nihei	Case number (if known)								
Ρ	art 10:	Give Details About Environmental Information									
For	or the purpose of Part 10, the following definitions apply:										
ı	■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.										
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.										
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.										
Rep	oort all n	otices, releases, and proceedings that you know about, regardless of	when they occurred.								
24.	Has any	y governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental								
25.	Have yo	s. Fill in the details. ou notified any governmental unit of any release of hazardous materia s. Fill in the details.	ıl?								
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and								
	✓ No ☐ Yes	s. Fill in the details.									
P	art 11:	Give Details About Your Business or Connections to A	ny Business								
27.	Within busines	4 years before you filed for bankruptcy, did you own a business or ha ss?	ve any of the following connections to any								
		A sole proprietor or self-employed in a trade, profession, or other activity A member of a limited liability company (LLC) or limited liability partnersl A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporatior	nip (LLP)								
		None of the above applies. Go to Part 12. s. Check all that apply above and fill in the details below for each business.	5.								
28.		2 years before you filed for bankruptcy, did you give a financial staten ncial institutions, creditors, or other parties.	nent to anyone about your business? Include								
	□ No	s. Fill in the details below									

Debtor 1	Keith Tsuyoshi Nihei						
Debtor 2	Carly Nicole Nihei		Case number (if known)				
Part 12	Sign Below						
that the an property b	swers are true and correct. I unde	rstand that making a false stat uptcy case can result in fines (chments, and I declare under penalty of perjury sement, concealing property, or obtaining money or up to \$250,000, or imprisonment for up to 20 years,				
	th Tsuyoshi Nihei suyoshi Nihei, Debtor 1	X /s/ Carly Nicole N Carly Nicole Nihei, I					
Date _	09/28/2023	Date	23				
Did you at	tach additional pages to Your State	ment of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?				
✓ No ☐ Yes							
Did you pa	y or agree to pay someone who is	not an attorney to help you fill	out bankruptcy forms?				
☑ No							
Yes. N	lame of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				

UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII HONOLULU DIVISION

IN RE: Keith Tsuyoshi Nihei Carly Nicole Nihei

Date 9/28/2023

CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

Signature /s/ Carly Nicole Nihei

Carly Nicole Nihei

Affirm, Inc. 30 Isabella 4th Floor Pittsburgh, PA 15212

Affirm, Inc. 30 Isabella St., 4th Floor Pittsburgh, PA 15212

American Express/Delta P.O. Box 360001 Fort Lauderdale, FL 33336-0001

Amex Correspondence/Bankruptcy PO Box 981540 El Paso, TX 79998

Attorney General 425 Queen St. Honolulu, HI 96813

Bank Of America PO Box 15019 Wilmington, DE 19886-5019

Bank of America PO Box 851001 Dallas, TX 75285-1001

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Bank Of Hawaii P.O. Box 2900 Honolulu, HI 96846 Barclays PO Box 8801 Wilmington, DE 19801

Blake Goodman, PC 900 Fort Street Mall, #910 Honolulu, Hawaii 96813

Citi Bank/Best Buy PO Box 183195 Columbus, OH 43218

Citibank
Citicorp Cr Srvs/Centralized Bankruptcy
PO Box 790040
St Louis, MO 63179

Citibank/The Home Depot Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040 St Louis, MO 63179

Comenity/Ann Taylor PO Box 182273 Columbus, OH 43218-2273

Department of Taxation State of Hawaii Attn: Bankruptcy Unit PO Box 259 Honolulu, HI 96809-0259

Disney Vacation Development 1851 Community Drive Lake Buena Vista, FL 32830

First Hawaiian Bank PO Box 3200 Honolulu, HI 96847 Freedom Road Financial Attn: Bankruptcy 10509 Professional Circle, Suite 100 Reno, NV 89521

Hawaii State FCU PO Box 3072 Honolulu, HI 96802

Hawaii State FCU Attn: Bankruptcy PO Box 3072 Honolulu, HI 96802

Home Depot Credit Services P.O. Box 78011 Phoenix, AZ 85062-8011

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Joseph Bega 460 Kamaaha Ave #22 Kapolei, HI 96707

Macys CBNA P.O. Box 9001094 Louisville, KY 40290-1094

Matanuska Valley FCU 94-144 Farrington Hwy #144 Waipahu, HI 96797

Navient Attn: Bankruptcy PO Box 9500 Wilkes-Barre, PA 18773 Rocket Mortgage 1050 Woodward Ave. #1050 Detroit, MI 48226

Synchrony Bank/Money Sport Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Synchrony/Amazon P.O. Box 960013 Orlando, FL 32896-0013

Synchrony/Lowes P.O. Box 530914 Atlanta, GA 30353-0914

Synchrony/PayPal Credit Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Timberland Bank/BHG 201 Solar Street Syracuse, NY 13204